

FEB 12 2007

FITZPATRICK, CELLA, HARPER & SCINTO

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FACSIMILE COVER SHEET

MESSAGE

Attachments:

- 1) Amendment Transmittal
- 2) Amendment

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office on:

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Diamond B. Vadnais, Reg. No. 52,310
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FEB 12 2007

In re Application of:

Docket No. 00684.003542.

YASUHISSA TNAO, et al.

Application No.: 10/663,691

Examiner: J. S. Ruggles

Filed: September 17, 2003

Group Art Unit: 1756

For: MASK, EXPOSURE APPARATUS,
AND EXPOSURE METHOD

Date: February 12, 2007

Mail Amendment
 THE COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 5	MINUS	** 23	= 0	x \$25 \$50	\$0
INDEP. CLAIMS	* 1	MINUS	*** 5	= 0	x \$100 \$200	\$0
Fee for Multiple Dependent claims \$180*/\$360						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$ _____ is enclosed.

Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.

A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.

Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Diamond E. Vaudnais
Attorney for Applicants
Registration No.: 52,310

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Form #120

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00684.003542.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
YASUHISA INAO, et al.) : Examiner: J. S. Ruggles
Application No.: 10/663,691) : Group Art Unit: 1756
Filed: September 17, 2003) :
For: MASK, EXPOSURE)
APPARATUS, AND)
EXPOSURE METHOD) : February 12, 2007

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated November 14, 2006, please amend the above-identified application, as follows:

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February 12, 2007

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Signature

Diamond E. Vadnais, Reg. No. 52,310